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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

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SUFFOLK COUNTY OF FLORIDA

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16 MAR -3 AM 9:42
SUFFOLK COUNTY OF FLORIDA

MAR 04 2016

Y SULKER

Date: 03/03/2016

Account #: I20000000088

Name: Michelle Walker

Reference #: G023822

ENTITY NAME: TJA HEALTH CANADA ULC CORPORATION

☒ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Annual Report

☐ Change of Agent

☐ Reinstatement

☐ Conversion

☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☐ Other: _____

Authorized Amount: \$70

Signature: Michelle Walker

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Authorized Amount: \$70

Signature: Michelle Walker

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TJA Health Canada ULC Corporation
Name of corporation - must include suffix

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida," "Certificate of Existence," or "Certificate of Good Standing" and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Richard B. Raymer

Name of Person

Dorsey & Whitney LLP

Firm/Company

TD Canada Trust Tower, Brookfield Place, 161 Bay Street, Suite 4310

Address

Toronto, Ontario CANADA M5J 2S1

City/State and Zip code

sutkowski.victoria@dorsey.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Victoria C. Sutkowski

Name of Person

at (416)

Area Code

367-7374

Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☐ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA**

*IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.*

1. TJA Health Canada ULC Corporation
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. Alberta, Canada 3. N/A
(State or country under the law of which it is incorporated) (FEI number, if applicable)

4. 2/19/2016 5. _____
(Date of incorporation) (Date of duration, if other than perpetual)

6. _____
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 2501 Reeves Road, Joliet, IL 50436
(Principal office address)

(Current mailing address, if different)

8. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: National Corporate Research, Ltd., Inc.

Office Address: 115 North Calhoun Street, Suite 4

Tallahassee, Florida 32301
(City) (Zip code)

9. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Bibram Creanlar, Asst. Secy
(Registered agent's signature)

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

FILED
16 MAR -3 AM 9:43
TALLAHASSEE, FLORIDA

11. Names and business addresses of officers and/or directors:

A. DIRECTORS

Chairman: Lawrence Hier

Address: 2501 Reeves Road

Joliet, Illinois 60436

Vice Chairman: Rosella Santilli

Address: 2501 Reeves Road

Joliet, Illinois 60436

Director: _____

Address: _____

Director: _____

Address: _____

B. OFFICERS

President: Lawrence Hier

Address: 2501 Reeves Road, Joliet, Illinois 60436

Vice President: _____

Address: _____

Secretary: Lawrence Hier

Address: 2501 Reeves Road, Joliet, Illinois 60436

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

12. 

Signature of Director or Officer

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he or she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Lawrence Hier, President

(Typed or printed name and capacity of person signing application)

16 MAR 13 AM 9:43
CLERK OF SUPERIOR COURT
JOLIET, ILLINOIS

CERTIFICATE OF STATUS

Form 32

I CERTIFY THAT ACCORDING TO THE OFFICIAL RECORDS OF THE CORPORATE
REGISTRY

TJA HEALTH CANADA ULC
INCORPORATED IN ALBERTA ON 2016/02/19
IS AS OF THIS DATE A VALID AND SUBSISTING CORPORATION.

GIVEN UNDER MY SEAL OF OFFICE IN THE PROVINCE OF ALBERTA.

DATED: 2016/03/02

